

TEMPORARY WORKFORCE HOUSING INSPECTION REPORT

REASON				INSPECTION DATE:	ESTABLISHMENT NAME:
Primary	2ND	Follow-up		12/11/17	MODERN INTERNATIONAL INC.
Secondary		Complaint		TIME IN:	OWNER / OPERATOR:
Tertiary		Other (Specify)		9:00AM	MODERN INTERNATIONAL INC.
GRADE:		WORKERS' DORMITORY	TIME OUT:	LOCATION:	
0/A		PERMIT NO: 3270 1700007490	9:40AM	LOT 5027-6-R1, UNIT A104 OARIUS APT., PANGELINAN LANE, HARMON	

Based on the inspection today, the items listed below identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

[illegible]

I am the responsible party of the establishment, have read and understand the above violation(s), and am aware of the corrective measures that shall be taken.

<p>*When any of the following items are cited above, they shall be corrected within ten days of this inspection: (7); (15); (16); (19); (20); (23); (31); (33); (36); and (38)</p>	RECEIVED BY (Name and Title)	SIGNATURE:
	PRINT: KEY MIRANDA EE	
	DEH OFFICIAL (Name and Title)	SIGNATURE:
	PRINT: R. ORIONDO, EPHO I	
	REVIEWED BY (Name and Title)	SIGNATURE:
	PRINT:	

WHITE COPY - DEH OFFICE YELLOW COPY - ESTABLISHMENT